

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 94-R-0009
CUSTOMER NUMBER: 869

FORM APPROVED
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY
(TYPE OR PRINT)

Universidad Central Del Carib
School Of Medicine
Call Box 60-327
Bayamon, PR 00960

Telephone: (787) -798-3001

OCT 21 2002

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use APHIS Form 7023A)

A. Animals Covered By The Animal Welfare Regulations	B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain- relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a	E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to	F. TOTAL NUMBER OF ANIMALS (COLUMNS C + D + E)
4. Dogs	N/A	N/A	N/A	N/A	N/A
5. Cats	N/A	N/A	N/A	N/A	N/A
6. Guinea Pigs	N/A	N/A	N/A	N/A	N/A
7. Hamsters	N/A	N/A	N/A	N/A	N/A
8. Rabbits	N/A	N/A	N/A	N/A	N/A
9. Non-human Primate	N/A	N/A	N/A	N/A	N/A
10. Sheep	N/A	N/A	N/A	N/A	N/A
11. Pigs	N/A	N/A	N/A	N/A	N/A
12. Other Farm Animals	N/A	N/A	N/A	N/A	N/A
13. Other Animals	N/A	N/A	N/A	N/A	N/A

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
- 2) Each principal investigator has considered alternatives to painful procedures.
- 3) This facility is adhering to the standards and regulations under the Act, and it has required that exceptions to the standards and regulations be specified and explained by the principal investigator and approved by the Institutional Animal Care and Use Committee (IACUC). A summary of all such exceptions is attached to this annual report. In addition to identifying the IACUC-approved exceptions, this summary includes a brief explanation of the exceptions, as well as the species and number of animals affected.
- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL
(Chief Executive Officer or Legally Responsible Institutional Official)

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print

DATE SIGNED

Dra. Nilda Candelario, President

10/14/02

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 94-R-0010
CUSTOMER NUMBER: 893

FORM APPROVED
OMB NO. 0579-0036

All redactions on this page are pursuant to (b)(6) & (b)(7)(c).

ANNUAL REPORT OF RESEARCH FACILITY
(TYPE OR PRINT)

Facility Location: Research Building Main Campus

Ponce School Of Medicine
P.O. Box 7004
Ponce, PR 00732

Telephone: (787)-840-2575

Fax: (787) 841-1040

January 1, 2002 - October 31, 2002

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use APHIS Form 7023A)

A. Animals Covered By The Animal Welfare Regulations	B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain- relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a	E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to	F. TOTAL NUMBER OF ANIMALS (COLUMNS C + D + E)
4. Dogs	0	0	0	0	0
5. Cats	0	0	0	0	0
6. Guinea Pigs	0	0	0	0	0
7. Hamsters	0	0	0	0	0
8. Rabbits	0	0	0	0	0
9. Non-human Primate	0	0	0	0	0
10. Sheep	0	0	0	0	0
11. Pigs	0	0	0	0	0
12. Other Farm Animals	0	0	0	0	0
13. Other Animals					
Mice	250	157	0	0	407
Rats	317	955	0	0	1272

ASSURANCE STATEMENTS

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CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL
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SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print

DATE SIGNED

Jose A. Torres-Ruiz, Ph.D.
Assoc. Dean for Research & Graduate Studies

11/1/2002

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: *04 R 0101 Pending
CUSTOMER NUMBER: 887 1411840

FORM APPROVED
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY
(TYPE OR PRINT)

*Caribbean Bio-Labs, Inc.
P.O. Box 325
San German, PR 00683
Telephone: (809) -892-2650

Nov 8/02
Per. D.R. Kilham

NOV 18 2002

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use APHIS Form 7023A)

A. Animals Covered By The Animal Welfare Regulations	B. Number of animals being bred, conditioned, or - held for use in teaching, testing, experiments, research, or surgery but not yet	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain- relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a	E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to	F. TOTAL NUMBER OF ANIMALS (COLUMNS C + D + E)
4. Dogs	0	0	0	0	0
5. Cats	0	0	0	0	0
6. Guinea Pigs	0	58	0	0	58
7. Hamsters	0	0	0	0	0
8. Rabbits	20	43	0	0	43
9. Non-human Primate	0	0	0	0	0
10. Sheep	0	0	0	0	0
11. Pigs	0	0	0	0	0
12. Other Farm Animals	0	0	0	0	0
	0	0	0	0	0
13. Other Animals	0	0	0	0	0

ASSURANCE STATEMENTS

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- 2) Each principal investigator has considered alternatives to painful procedures.
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(Chief Executive Officer or Legally Responsible Institutional Official)

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print

DATE SIGNED

Oliver W. Kilham, Ph.D.

Nov. 8, 02

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 94-R-0103
CUSTOMER NUMBER: 864

FORM APPROVED
OMB NO. 0579-0036

ANNUAL REPORT OF RESEARCH FACILITY
(TYPE OR PRINT)

Brad R. Weiner
University Of Puerto Rico-Rio Piedras Ca
Po Box 23360
San Juan, PR 00931

Telephone: (787) -764-0000

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use APHIS Form 7023A)

A. Animals Covered By The Animal Welfare Regulations	B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain- relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a	E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to	F. TOTAL NUMBER OF ANIMALS (COLUMNS C + D + E)
4. Dogs	0	0	0	0	0
5. Cats	0	0	0	0	0
6. Guinea Pigs	0	0	0	0	0
7. Hamsters	0	0	0	0	0
8. Rabbits	0	0	0	0	0
9. Non-human Primate	0	0	0	0	0
10. Sheep	0	0	0	0	0
11. Pigs	0	0	0	0	0
12. Other Farm Animals	0	0	0	0	0
13. Other Animals	0	0	0	0	0

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
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(Chief Executive Officer or Legally Responsible Institutional Official)

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

Brad R. Weiner


NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print

Brad R. Weiner, Dean, Fac. Natural Sciences

DATE SIGNED

94 R 103

3. Reporting Facility:


Animal House Facilities
PO Box 23360
Department of Biology
Graduate Program

DEC 2 2002

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. CERTIFICATE NUMBER: 94-R-0109
CUSTOMER NUMBER: 960

FORM APPROVED
OMB NO. 0579-0035

ANNUAL REPORT OF RESEARCH FACILITY
(TYPE OR PRINT)

University Of Puerto Rico
Medical Sciences Campus
Po Box 365067
San Juan, PR 00936

Telephone: (787) -758-2525

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, or experimentation, or held for these purposes. Attach additional sheets if necessary)

FACILITY LOCATIONS (Sites) - See Attached Listing

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use APHIS Form 7023A)

A. Animals Covered By The Animal Welfare Regulations	B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain-relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, a	E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to	F. TOTAL NUMBER OF ANIMALS (COLUMNS C + D + E)
4. Dogs					
5. Cats					
6. Guinea Pigs					
7. Hamsters			157		157
8. Rabbits					
9. Non-human Primate	1792	190	46		2028
10. Sheep					
11. Pigs			23		23
12. Other Farm Animals					
13. Other Animals					
rats		443	457		900
mice		356	162		518
squirrel		93			93

ASSURANCE STATEMENTS

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(Chief Executive Officer or Legally Responsible Institutional Official)

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL



NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print

José R. Carlo, MD, Chancellor

DATE SIGNED

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE

1. REGISTRATION NO.

94-R-0110

FORM APPROVED
OMB NO. 0579-0038ANNUAL REPORT OF RESEARCH FACILITY
(TYPE OR PRINT)2. HEADQUARTERS RESEARCH FACILITY (Name and Address, as registered with USDA
include Zip Code)Inter American University of P.R.
Metropolitan Campus
PO Box 363255
San Juan, PR 00936-3255

JAN 07 2003

3. REPORTING FACILITY (List all locations where animals were housed or used in actual research, testing, teaching, or experimentation, or held for these purposes. Attach additional
sheets if necessary.)

Inter American University of Puerto Rico

FACILITY LOCATIONS (Sites)

REPORT OF ANIMALS USED BY OR UNDER CONTROL OF RESEARCH FACILITY (Attach additional sheets if necessary or use APHIS FORM 7023A)

A. Animals Covered By The Animal Welfare Regulations	B. Number of animals being bred, conditioned, or held for use in teaching, testing, experiments, research, or surgery but not yet used for such purposes.	C. Number of animals upon which teaching, research, experiments, or tests were conducted involving no pain, distress, or use of pain- relieving drugs.	D. Number of animals upon which experiments, teaching, research, surgery, or tests were conducted involving accompanying pain or distress to the animals and for which appropriate anesthetic, analgesic, or tranquilizing drugs were used.	E. Number of animals upon which teaching, experiments, research, surgery or tests were conducted involving accompanying pain or distress to the animals and for which the use of appropriate anesthetic, analgesic, or tranquilizing drugs would have adversely affected the procedures, results, or interpretation of the teaching, research, experiments, surgery, or tests. (An explanation of the procedures producing pain or distress in these animals and the reasons such drugs were not used must be attached to this report).	F. TOTAL NO. OF ANIMALS (Cols. C + D + E)
4. Dogs					
5. Cats					
6. Guinea Pigs					
7. Hamsters					
8. Rabbits					
9. Non-human Primates					
10. Sheep					
11. Pigs					
12. Other Farm Animals					
13. Other Animals					

ASSURANCE STATEMENTS

- 1) Professionally acceptable standards governing the care, treatment, and use of animals, including appropriate use of anesthetic, analgesic, and tranquilizing drugs, prior to, during, and following actual research, teaching, testing, surgery, or experimentation were followed by this research facility.
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- 4) The attending veterinarian for this research facility has appropriate authority to ensure the provision of adequate veterinary care and to oversee the adequacy of other aspects of animal care and use.

CERTIFICATION BY HEADQUARTERS RESEARCH FACILITY OFFICIAL
(Chief Executive Officer or Legally Responsible Institutional Official)

I certify that the above is true, correct, and complete (7 U.S.C. Section 2143)

SIGNATURE OF C.E.O. OR INSTITUTIONAL OFFICIAL

NAME & TITLE OF C.E.O. OR INSTITUTIONAL OFFICIAL (Type or Print)

DATE SIGNED

Manuel J. Fernós
President

01/07/03